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CONFIRMATION NO. 5739

SERIAL NUMBER	FILING or 371(c) DATE RULE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.
10/596,369		714	2112	SC13080EI

APPLICANTS

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** CONTINUING DATA *****

This application is a 371 of PCT/IB04/04319 12/08/2004

** FOREIGN APPLICATIONS *****

UNITED KINGDOM 0328783.6 12/11/2003

** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **

01/11/2007

Foreign Priority claimed	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Met after Allowance	STATE OR COUNTRY	SHEETS DRAWINGS	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119(a-d) conditions met	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		ISRAEL	2	19	3

ADDRESS

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TITLE

Multi-standard turbo interleaver using tables

FILING FEE RECEIVED 1030	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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